



APPLICATION FOR VOLUNTEER FIRE ASSISTANCE

Department of Natural Resources \ Division of Forestry

State Form 50310 (7-01)

1. Date of Application _____
2. Department Name _____
(please provide full legal name)
3. Department Address _____

4. Was this department formed within the last 24 months? Yes \ No
5. Department NIFRS Number _____ - _____
(2 digit county + 3 digit department, example 55.015)
6. County _____ Township _____
7. Federal Tax Identification Number _____ - _____
(9 digit number)
8. What is the approximate population base served by your department? _____
9. What is the approximate size of your departments **primary protection** area? (square miles) _____
10. Attach a county or township map showing the location of your department and the primary protection area for which you are responsible to the back of the application.
11. What is the current Insurance Services Office (ISO) rating for your protection area? _____
11. List any federal or state (public) properties (greater than 500 acres) that fall within your **primary protection** area.

_____	_____
_____	_____
_____	_____
(property name)	(Total Acreage)

continue on next page

12. Is this request for assistance based on an emergency situation that jeopardizes your ability to provide fire protection to your protection area? **Yes \ No**

If “Yes” please explain in the space below. You may attach additional sheets if necessary.

13. Is this request for assistance a “multi-department” or “multi-community” proposal? **Yes \ No**

If “Yes” please explain in the space provided below. You may attach additional sheets if necessary.

14. The applicants certify that to the best of their knowledge that the information provided in this application to be true and correct, and that they will comply with the program guidelines if accepted.

(Please print or type the applicant’s full name)

(Official Title)

(Signature)

(Date)

(Business Telephone Area Code + Number + Extension)
Telephone Area Code + Number)

(Home

Return this application to:

Fire Control Headquarters
6220 Forest Road
Martinsville, IN 46151
Phone (765) 342-4701
Fax (765) 342-4760